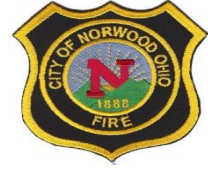


Received Date	Time
BY	

# NORWOOD FIRE DEPARTMENT

## Employment Application



### APPLICANT INFORMATION

Last Name			First			M. I.		
Street Address						Apartment/Unit #		
City			State			ZIP		
Home Phone			Work Phone			Mobile Phone		
Social Security No.			Date of Birth			Position Applied for		
Have you ever <b>Applied</b> for a job with the City of Norwood?			YES <input type="checkbox"/>	NO <input type="checkbox"/>	(Explain)			
Have you ever <b>Worked</b> for the City of Norwood?			YES <input type="checkbox"/>	NO <input type="checkbox"/>	(Explain)			
Has the Norwood Civil Service Commission ever rejected your application?					YES <input type="checkbox"/>	NO <input type="checkbox"/>		
(If Yes, Why?)								
Are you at least 18 years of age?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	Do you have a valid Driver's		YES <input type="checkbox"/>	NO <input type="checkbox"/>	If yes, list state and license #
Military Veteran's Credit	YES <input type="checkbox"/>	NO <input type="checkbox"/>	20% Credit	<b>Attach DD214</b>				
Four Year College Degree	YES <input type="checkbox"/>	NO <input type="checkbox"/>	10% Credit	<b>Attach Degree Certificate</b>				
Two Year College Degree	YES <input type="checkbox"/>	NO <input type="checkbox"/>	5% Credit	<b>Attach Degree Certificate</b>				
Ohio Certified Firefighter II (240 hours)	YES <input type="checkbox"/>	NO <input type="checkbox"/>	10% Credit	<b>Attach Certification</b>				
Ohio Certified Firefighter I (120 hours)	YES <input type="checkbox"/>	NO <input type="checkbox"/>	5% Credit	<b>Attach Certification</b>				
Ohio Certified EMT-P Paramedic	YES <input type="checkbox"/>	NO <input type="checkbox"/>	10% Credit	<b>Attach Certification</b>				
Ohio Certified EMT-B Basic	YES <input type="checkbox"/>	NO <input type="checkbox"/>	5% Credit	<b>Attach Certification</b>				

### EDUCATION

High School			Address					
From	To	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	G. E. D.?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	
College			Address					
From	To	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree			
Other								
From	To	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree			
Other			Address					
From	To	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree			

**EDUCATION continued**

What were your major fields in college?

List any SPECIAL COURSES you have completed, such as: night school, manpower training programs, correspondence courses, courses with the Armed Forces, business college, etc., which would help you to qualify for the position applied for:

COURSES	SCHOOL	NUMBER OF CREDIT HOURS (semester)

**REMARKS:** Use this space for any further information that will be helpful in evaluating your application, such as: job related volunteer work and hobbies. Attach an additional sheet if needed. (For CONVICTION Records: list when, where, and for what.)

*References (Please list three)*

Full Name		Phone	
Company			
Address		Relationship	
Full Name		Phone	
Company			
Address		Relationship	
Full Name		Phone	
Company			
Address		Relationship	

**PREVIOUS EMPLOYMENT**

Company		Phone	
Address		Supervisor	
Job Title		Starting Salary \$	Ending Salary \$
Responsibilities			
From	To	Reason for Leaving	

May we contact your previous supervisor for a reference? YES  NO

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<b>PREVIOUS EMPLOYMENT continued</b>			
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Company		Phone	
Address		Supervisor	
Job Title	Starting Salary	\$	Ending Salary \$
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference?      YES <input type="checkbox"/> NO <input type="checkbox"/>			

<b>PREVIOUS EMPLOYMENT continued</b>			
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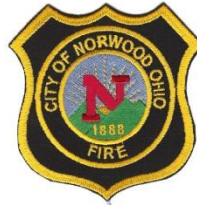
Company		Phone	
Address		Supervisor	
Job Title	Starting Salary	\$	Ending Salary \$
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference?      YES <input type="checkbox"/> NO <input type="checkbox"/>			

How did you find out that the Norwood Fire Department was hiring? Please take a minute to let us know.			

<b>APPLICANT'S CERTIFICATE AND RELEASE</b>			
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All information provided by me in support of my application for employment is true and correct to the best of my knowledge. I understand that misrepresentations or omissions may be cause for rejection, or may be cause for subsequent dismissal if I am hired. I hereby authorize any present or former employer, person, firm, corporation, or government agency to answer any and all questions and to release or provide any information within their knowledge or records. I agree to hold any and all of them blameless and free of any liability for releasing any truthful information that is within their knowledge or records.

Signature		Date	
Address			



## **FAIR CREDIT REPORTING ACT DISCLOSURE FORM**

Certain amendments to the Fair Credit Reporting Act, effective September 30, 1997, impose upon Employers certain disclosure obligations when it is contemplated that certain consumer reports will be utilized. Therefore, in accordance with the Fair Credit Reporting Act, you are hereby advised of the following:

1. You are hereby advised that a Consumer Report or an Investigative Consumer Report may be requested from a Consumer Reporting Agency about you. An Investigative Consumer Report may include information about your character, general reputation, personal characteristics and mode of living.
2. If an Investigative Consumer Report is requested, you have the right to obtain a complete and accurate statement of the nature and scope of the investigation and to be generally advised of your consumer rights under the Fair Credit Reporting Act.
3. If adverse action is contemplated based upon a Consumer Report or Investigative Consumer Report, you will be provided additional notices and information.

## **FAIR CREDIT REPORTING ACT ACKNOWLEDGEMENT AND AUTHORIZATION**

I hereby authorize Norwood, Ohio or its authorized agents, to conduct a thorough investigation of me during the course of the Employment Application process including, without limitation, information concerning my prior employment positions, criminal background, educational background, and personal history. This authorization specifically includes Consumer Reports and Investigative Consumer Reports.

I hereby acknowledge receipt of a Fair Credit Reporting Act Disclosure Form which has fully advised me of my rights under the Fair Credit Reporting Act.

**Applicant signature:** \_\_\_\_\_

**Applicant name:** \_\_\_\_\_ **Date:** \_\_\_\_\_